FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person* <u>Hirshberg Al J.</u>															Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	,	(First) (Middle) DAIRY ASHFORD				3. Date of Earliest Transaction (Month/Day/Year) 10/06/2013									X Officer (give title Other (specify below) below) Executive Vice President					
(Street) HOUSTON TX 77079				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)													Person				
1. Title of Security (Instr. 3) 2. T			2. Transactio Date (Month/Day/Y	n	2A. Dee Executi if any		3. Transaction Code (Instr. 8)		5)			or	5. An Sect Ben Own Rep	mount of urities eficially ned Followir orted	6. Owners Form: Dire (D) or Indi (I) (Instr. 4	ect Indire	ure of ct Beneficial rship (Instr.			
								Code	· V	┿	ount	(A) or (D)	Price			saction(s) tr. 3 and 4)				
Common				10/06/20				M		+	4,195	A		(1)		64,195	D	-		
Common				10/06/20				F	-	+-	5,930	D	1	0.51		37,265	D	\perp		
Common				05/08/20:				M	-	1	,687	A	-	(1)		41,952	D	_		
Common	Stock			05/08/20:	15			F	_	1	,967	D	\$66	5.865		39,985	D			
Common	Stock															4,000	I	The Hirs	rustee for Charles S. aberg, MD ocable t	
Common	Stock															5,000	I	The Hirs and W. I	Trustee for Charles S. hberg, MD Dorothy firshberg ily Trust	
Common Stock												1,	312.497 ⁽²) I		By ConocoPhillips Savings Plan				
		-	Table	e II - Deriva (e.g.,			rities A									Owned				
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed 2 Execution Date Execution Date, if any			4. Trans	5. Number of of Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			bunt 8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)		

Explanation of Responses:

(1)

(1)

1. The stock units convert to ConocoPhillips common stock on a 1-for-1 basis.

10/06/2013

05/08/2015

2. Includes units acquired through routine dividend transactions that are exempt under rule 16a-11.

Code

M

M

(A) (D)

64,195

4,687

- 3. The stock units lapse on the third anniversary of the grant date.
- 4. The stock units will be forfeited if the reporting person terminates for any reason except layoff, death or disability prior to the third anniversary of the grant date. The stock units will convert to common stock on the earliest of the reporting person's death, the third anniversary of the grant date, or six months after termination for a reason other than death, unless the units have previously forfeited. The reporting person may also defer conversion of stock units until a later date.

Date

Exercisable

(3)

(4)

Expiration

(3)

(5)

Title

Commo

Stock

Commo

Stock

5. The stock units do not have an expiration date.

Remarks:

Stock Units

Stock

Number

of Shares

64,195

4,687

\$0.00

\$0.00

0

0

D

D

of Attorney filed with the Commission on February 7, 2013)

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.